



10-13-05

AF/2122 #
ZPWPTO/SB/31 (04-05)
Approved for use through 07/31/2006. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

**NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD
OF PATENT APPEALS AND INTERFERENCES**

Docket Number (Optional)

03343/0001048-US0

In re Application of
Patrick KerpanApplication Number
09/755,955-Conf. #5180Filed
January 5, 2001For TEMPORAL CONTEXT PROGRAMMING IN OBJECT-
ORIENTED ENVIRONMENTSArt Unit
2122Examiner
C. O. KendallApplicant hereby **appeals** to the Board of Patent Appeals and Interferences from the last decision of the examiner.

The fee for this Notice of Appeal is (37 CFR 41.20(b)(1))

\$ 500.00

☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown
above is reduced by half, and the resulting fee is:

\$

☒ A check in the amount of the fee is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☐ The Director has already been authorized to charge fees in this application to a Deposit Account.
I have enclosed a duplicate copy of this sheet.☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to
Deposit Account No. 04-0100. I have enclosed a duplicate copy of this sheet.☐ A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.

I am the

☐ applicant /inventor.☐ assignee of record of the entire interest.
See 37 CFR 3.71. Statement under 37 CFR 3.73(b)
is enclosed. (Form PTO/SB/96)☒ attorney or agent of record.Registration number 36,195☐ attorney or agent acting under 37 CFR 1.34.

Registration number if acting under 37 CFR 1.34. _____

SignatureDavid Leason
Typed or printed name

(212) 527-7602

Telephone number

October 11, 2005

Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required.
Submit multiple forms if more than one signature is required, see below*.☐ *Total of 1 forms are submitted.

10/17/2005 HLE333 00000016 09755955

01 FC:1401

500.00 OP

\\03343\0001048us0\00547229.doc 100547229.doc

Express Mail Label No.

Dated: _____